PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE **Commissioner for Patents** P.O. Box 1450

Alexandria, Virginia 22313-1450

(703) 746-4000 or <u>Fax</u>

	INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.						
)5/		Orive 6525			Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission Lereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.		
	FC:1501 1400.00		``	BADENGEN	ROBERT	Ho BACHMAN	(Depositor's name)
2	FC:1504 300.00) DA			Man 33	3005	(Signature)
•	FC:8001 30.00	у ИН	•		May 23	, 2005	(Date)
	- APPLICATION NO.	FILING DATE		FIRST NAMED INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
	10/642,320	10/642,320 08/15/2003 Ma			A. Pedmo . 03-204 2843		
	APPLN. TYPE	SMALL ENTITY	issue f	EE PI	JBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
	nonprovisional	nonprovisional NO \$1400 EXAMINER ART UNIT WEAVER, SUE A 3727)	\$300	\$1700	08/08/2005
	EXAM			it c	LASS-SUBCLASS	ו	
	WEAVER				215-381000	J	
	1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list						
	"Fee Address" indicat PTO/SB/47; Rev 03-02 o Number is required. 3. ASSIGNEE NAME AND	ion (or "Fee Address" Indica or more recent) attached. Use RESIDENCE DATA TO B	ation form e of a Customer E PRINTED ON I	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. N THE PATENT (print or type)			
	PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
	PLASTIPAK PACKAGING, INC. PLYMOUTH, MICHIGAN, U.S.A.						
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government							oup entity Government
	4a. The following fee(s) are enclosed: 4b. Payment of Fee(s):						
	☐ Issue Fee ☐ A check in the amount of the fee(s) is enclosed.						
Publication Fee (No small entity discount permitted) Advance Order - # of Copies 10 Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any over Deposit Account Number 502640 (enclose an extra copy of this form							credit any overnayment to
				Deposit Account Nu	mber 50264	(enclose an extra c	copy of this form).
	5. Change in Entity Status a. Applicant claims SN	(from status indicated above MALL ENTITY status. See		☐ b. Applicant is no	longer claiming SMA	LL ENTITY status. See 37 C	FR 1.27(g)(2).
						ly paid issue fee to the applications attorney or agent; or t	
	Authorized Signature	for Ba	LIN		Date Ma	ay 23, 2005	
	Typed or printed name	yped or printed nameROBERT_HBACHN		N Registrati		n No. 19374	
	This collection of informatio an application. Confidentiali submitting the completed ap	n is required by 37 CFR 1.3 ty is governed by 35 U.S.C. plication form to the USPT	11. The informatio 122 and 37 CFR O. Time will vary	n is required to obtain 1.14. This collection depending upon the	or retain a benefit by is estimated to take 12 individual case. Any c	the public which is to file (an minutes to complete, includin comments on the amount of ti	d by the USPTO to process) ng gathering, preparing, and me you require to complete

this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.